

Clark County Coroner
1704 Pinto Lane
Las Vegas, NV 89106
(702) 455-3210



AUTOPSY REPORT

Case Number: [REDACTED]

October 4, 2017

POSTMORTEM EXAMINATION ON THE BODY OF

[REDACTED]

Date of Pronounced Death: October 2, 2017

Date of Postmortem Examination: October 4, 2017

EXTERNAL EXAMINATION:

The body was received sealed with a seal number [REDACTED] along with the identification tag. The body was that of a normally developed and nourished, female, [REDACTED], appearing about the recorded age of [REDACTED] years. The body measured 68 inches in length and weighed 127 pounds. Rigor mortis had passed. Livor mortis was present posteriorly and fixed. Clothing was consisted of shirt, bra, underwear and shoes. The head was normocephalic and the scalp hair was brown. The eyes had white sclerae, pale conjunctivae, and brown irides. The dentition was natural. No lesions of the oral mucosa were identified. There were no masses discernable in the neck and the larynx was in the midline. The abdomen was flat. The external genitalia were those of a normal adult female. There were tattoos on midline lower back and right foot. There was a scar on the back of the head and suprapubic area. A plastic bracelet encircled the right wrist.

EVIDENCE OF TREATMENT: None

EVIDENCE OF INJURY:

PERFORATING GUNSHOT WOUND TO THE BACK:

There was a 0.4 cm x 0.4 cm round through and through entrance gunshot wound on the back, 13 inches below the top of the head and 5-3/4 inches right of the posterior midline. There was no soot or gunpowder stippling noted on the skin surrounding this wound. There was a 1 inch x 1/4 inch cluster of abrasions adjacent to the wound. The wound track proceeded from this injury through the soft tissue of the back, right scapula,

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posterior right chest wall, right lung, heart, left lung, left wing of the diaphragm, soft tissue of the left lateral chest wall and ended at an exit wound on the side of the left chest, 25 inches below the top of the head and 5 inches left of the anterior midline and with a 2-1/2 inch x 1 inch cluster of surrounding abrasions. Associated injuries included hemorrhage along the wound path and bilateral hemothoraces of at least 30 mL in the right pleural cavity and at least 25 mL in the left pleural cavity. The wound track was from back to front, right to left and downward when the body is viewed in the standard anatomical position.

Additional injuries:

There was a 5 inch x 4-1/2 inch cluster of abrasions on the midline lower back. There was a 5 inch x 5 inch cluster of abrasions on the right buttock. There was a 1/2 inch x 1/2 inch pink contusion on the medial right antecubital fossa. There was a 2-1/2 inch x 2-1/2 inch cluster of abrasions on the posterior left arm. There was a 1-1/4 inch x 1/2 inch cluster of abrasions on the posterior left elbow. There was a 1/2 inch x 1/2 inch cluster of abrasions on the posterior left hand, between the third and fourth metacarpal area. There was a 1-1/2 inch x 1-3/4 inch cluster of abrasions on the lateral proximal right thigh. There was a 1/2 inch x 1/2 inch abrasion on the right knee. There was a 1/8 inch x 1/8 inch abrasion and a 1/2 inch x 1/2 inch pink contusion on the anterior right leg. There was a 2-1/2 inch x 1 inch cluster of abrasions on the lateral surface of the right ankle. There was a 2-1/2 inch x 1/2 inch cluster of abrasions on the anterior left thigh.

SPECIMEN RETAINED: None

RADIOGRAPHS:

Anterior postmortem radiographs together encompassing the head, torso and extremities were taken and findings were included in the evidence of injury. Additionally, there were four screws

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identified on the top back region of the skull from prior cranial surgery.

FINAL DIAGNOSES

1. Perforating gunshot wound to the right back
2. Abrasions on the midline lower back, right buttock, posterior left arm, elbow, and hand, lateral proximal right thigh, right knee, leg, and ankle and anterior left thigh.
3. Contusions on the anterior right elbow and anterior right leg

OPINION:

It is my opinion that death was caused by gunshot wound to the right back sustained during mass fatality incident.

PERFORATING GUNSHOT WOUND TO THE BACK:

There was a through and through entrance gunshot wound on the right upper back. There was no evidence of close range of firing noted on the skin surrounding this wound. There was a cluster of abrasions adjacent to the wound. The wound track proceeded from this injury through the soft tissue of the back, right scapula, posterior right chest wall, right lung, heart, left lung, left wing of the diaphragm, soft tissue of the left lateral chest wall and ended at an exit wound on the side of the left lower chest with associated cluster of surrounding abrasions. Associated injuries included hemorrhage along the wound path and bilateral hemothoraces. The wound track was from back to front, right to left and downward when the body is viewed in the standard anatomical position.

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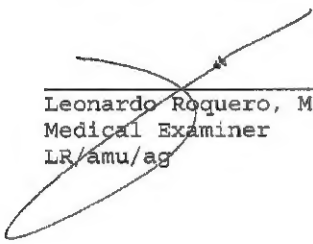
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Associated injuries included abrasions on the midline lower back, right buttock, posterior left arm, elbow, and hand, lateral proximal right thigh, right knee, leg, and ankle and anterior left thigh, and contusions on the right elbow and right leg.

Postmortem toxicology report revealed blood alcohol concentration (BAC) of 0.185 g/100 mL.

CAUSE OF DEATH: Gunshot wound to the right back

MANNER: HOMICIDE



Leonardo Roquero, M.D.
Medical Examiner
LR/amu/ag

DATE: 12/20/2017